

PLANNING AND DEVELOPMENT DEPARTMENT
2875 BROWNS BRIDGE ROAD, GAINESVILLE, GA, 30504
MAILING ADDRESS: PO BOX 1435, GAINESVILLE, GA 30503
t: 770-531-6809 | f: 770-531-3902



CONDITIONAL USE APPLICATION

Applicant (Name & Mailing Address)

Diane Schermerhorn
6147 Grand Marina Cir
Gainesville, GA 30506

Phone 706-265-5909

Email Address schermerhorn6@hotmail

Proposed Use Boat + RV covered storage

Contact Person (Name & Mailing Address)

Diane Schermerhorn
6147 Grand Marina Circle
Gainesville, GA 30506

Phone 706-265-5909 cell

Email Address schermerhorn6@hotmail

Tax Parcel Number 12-83-3B

Location Address 6580 Cleveland Hwy

I hereby certify that the above information and all attached information are true and correct.

Sign Diane Schermerhorn

Date: _____

Applicant must complete all information above. Failure to complete this section will result in the refusal of the application. The Planning Department has 15 days to review all applications and will set the dates for each application. If the application is found insufficient, an agenda date will not be set until the required information is submitted. Please note that the Planning Commission and County Commission dates are tentative.

Application Withdrawal: I hereby withdraw the application.

Sign _____

Date: _____

Staff Use Only

Application Date: _____

Taken by: _____

Tentative Planning Commission Date: 11/7

Tentative County Commission Date: 12/8

County Commission District: 3

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ZONING APPLICATION

Applicant (Name & Mailing Address)

Diane Schermerhorn
6147 Grand Marina Circle
Gainesville, GA 30506

Phone 706-265-5909 cell

Email Address schumerhorn6@hotmail.com

Proposed Use enclosed covered Boat + RV storage

Contact Person (Name & Mailing Address)

Diane Schermerhorn
same as applicant

Phone _____

Email Address schumerhorn6@hotmail.com

Tax Parcel Number 12-83-3B

Location Address 6580 Cleveland Hwy

Property Owner (Name & Mailing Address)

Vineyard Property Development LLC
same as applicant

Phone 706-429-7011 JEFF Schermerhorn

Email Address jeff.schermerhorn@gmail.com

Status of Applicant

Owner **AMEND condition 4**
 Option to Purchase Existing Zoning: I-I
 Area Resident Fee: \$50.00

Other Receipt #: 859044
authorized representative Check #: 1023

Acreage 8.97

Gainesville / Clermont

I hereby certify that the above information and all attached information are true and correct.

Sign Diane Schermerhorn Date: _____

Applicant must complete all information above. Failure to complete this section will result in the refusal of the application. The Planning Department has 15 days to review all applications and will set the dates for each application. If the application is found insufficient, an agenda date will not be set until the required information is submitted. Please note that the Planning Commission and County Commission dates are tentative.

Application Withdrawal: I hereby withdraw the application.

Sign _____ Date: _____

Staff Use Only

Application Date: _____ Taken by: _____

Tentative Planning Commission Date: 11/7 Tentative County Commission Date: 12/8

County Commission District: 3

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AUTHORIZATION OF PROPERTY OWNERS

Note: If the applicant is the property owner, please disregard this form.

Name of owner(s) Francis Sullivan

Address 8915 Merion Drive
Duluth, GA 30097

Phone Number 678-230-4206

Name of applicant(s) Diane L. Schermerhorn

Address 6147 Grand Marina Circle
Gainesville, Georgia 30506

Phone Number 706-265-5909

I swear that I am the owner of the property which is the subject matter of the attached applications as shown in the records of Hall County, Georgia.

I authorize the person named above to act as applicant in the pursuit of a rezoning, permissive use, or variance of this property.

Signature of Owner(s)

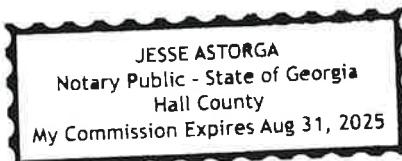
Personally appeared before me

Francis J. Sullivan

who swears that the information contained in this authorization is true and correct to the best of his/her knowledge and belief

Notary Public

9/7/22
Date



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AUTHORIZATION OF PROPERTY OWNERS

Note: If the applicant is the property owner, please disregard this form.

Name of owner(s) Jeffrey W. Schermerhorn
Address 6147 Grand Marina Circle
Gainesville, GA 30506
Phone Number 706-429-7011

Name of applicant(s) Diane L. Schermerhorn
Address 6147 Grand Marina Circle
Gainesville, Georgia 30506
Phone Number 706-265-5909

I swear that I am the owner of the property which is the subject matter of the attached applications as shown in the records of Hall County, Georgia.

I authorize the person named above to act as applicant in the pursuit of a rezoning, permissive use, or variance of this property.

Signature of Owner(s)

Personally appeared before me

who swears that the information contained in this authorization is true and correct to the best of his/her knowledge and belief.

Notary Public

Date

8.25.22



CAMPAIGN CONTRIBUTIONS DISCLOSURE FORM

This form must be completed by the applicant and property owner, or person representing the property owner, for all zoning actions.

OCGA § 36-67A-3[C] Disclosure of campaign contributions:

(b) When any applicant for zoning action has made, within two years immediately preceding the filing of the applicant's application for the zoning action, campaign contributions aggregating \$250.00 or more to a local government official who will consider the application, it shall be the duty of the applicant to file a disclosure report with the governing authority of the respective local government showing:

(3) The name and official position of the local government official to whom the campaign contribution was made; and

(4) The dollar amount and description of each campaign contribution made by the applicant to the local government official during the two years immediately preceding the filing of the application for the rezoning action and the date of each such contribution.

(b) The disclosures required by subsection (a) of this Code section shall be filed within ten days after the application for the zoning action is first filed. (Code 1981, Section OCGA § 36-67A-3[C], enacted by GA L. 1986, page 1269, Section 1, GA L. 1991, page 1365, Section 1).

I hereby certify that I have read the above and that:

I have** I have not X

within the two years immediately preceding this date, made any contribution(s) aggregating \$250.00 or more to any local government official involved in the review or consideration of this application.

****If you have made such contributions, you must provide the data required below within ten (10) days of filing this application.**

Name of Official(s): _____

Office: _____

Dollar Amount: _____

Date of Contribution: _____

Applicant's/Owner's Signature: _____



Date: 8/18/2022

Applicant's/Owner's Name (Printed): _____



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I hereby certify that I have read the above and that:

I have* I have not

within the two years immediately preceding this date, made any contribution(s) aggregating \$250.00 or more to any local government official involved in the review or consideration of this application.

*If you have made such contributions, you must provide the data required below within ten (10) days of filing this application.

Name of Official(s): _____ Office: _____

Dollar Amount: _____ Date of Contribution: _____

Applicant's/Owner's Signature: Francis J. Sullivan Date: 9/7/2022

Applicant's/Owner's Name (Printed): Francis J. Sullivan

CAMPAIGN CONTRIBUTIONS DISCLOSURE FORM

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within the two years immediately preceding this date, made any contribution(s) aggregating \$250.00 or more to any local government official involved in the review or consideration of this application.

****If you have made such contributions, you must provide the data required below within ten (10) days of filing this application.**

Name of Official(s): _____

Office: _____

Dollar Amount: _____

Date of Contribution: _____

Applicant's/Owner's Signature:  Date: 8/24/2022

Applicant's/Owner's Name (Printed): Jeffrey W. Schermerhorn